



Regulatory assessment by the UK CAA of applicants declaring HIV seropositivity

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Introduction

- Near normal life expectancy – several papers e.g. May et al. UK Collaborative HIV Cohort; BMJ 2011:

20yr olds starting anti-retrovirals	
Period	Life expectancy
1996-99	30.0yr
2006-08	45.8yr

- New infection management: HAART from diagnosis

Introduction

EU Aircrew regulations 1178/2011 AMC

“A fit assessment with a multi-pilot limitation may be considered”

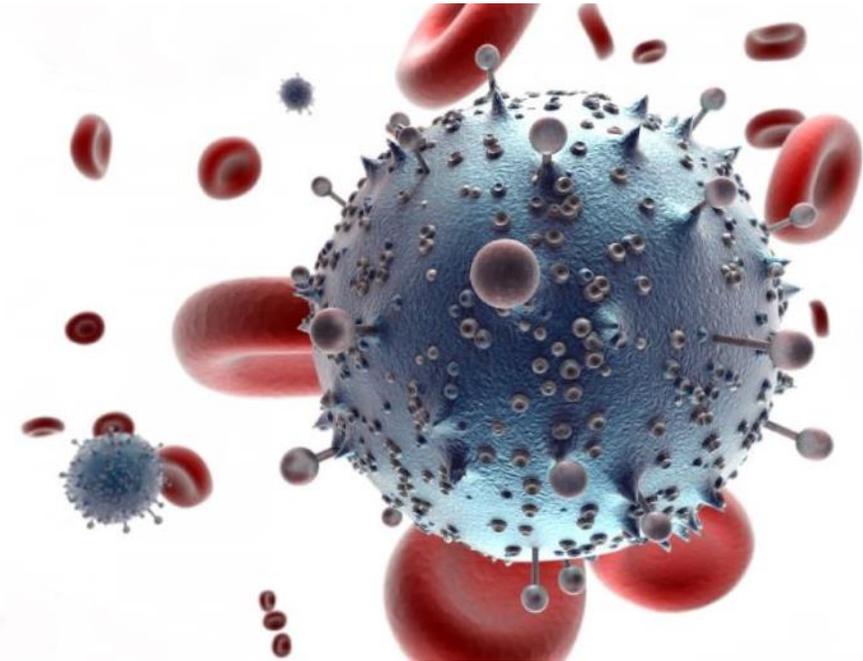
EU ATCO regulations 2015/340 AMC

“Applicants who are HIV positive may be assessed as fit”

Aim: Review assessments of applicants/certificate holders in the UK who have declared a positive HIV test to look at the outcomes and see whether there is a need to review and revise our policy in light of developments in infection management.

Method

- Review of UK CAA medical records database
- Extract data for all those declaring HIV seropositivity (positive HIV test)
 - Type of medical (i.e. initial, revalidation, renewal)
 - Class of certificate
 - Outcome of assessment including cognitive function test results
 - Those assessed as unfit – why? Were they ever issued subsequently?
 - Those assessed as fit – were there any issues thereafter related to HIV (including any unfit assessments up to May 2017)?



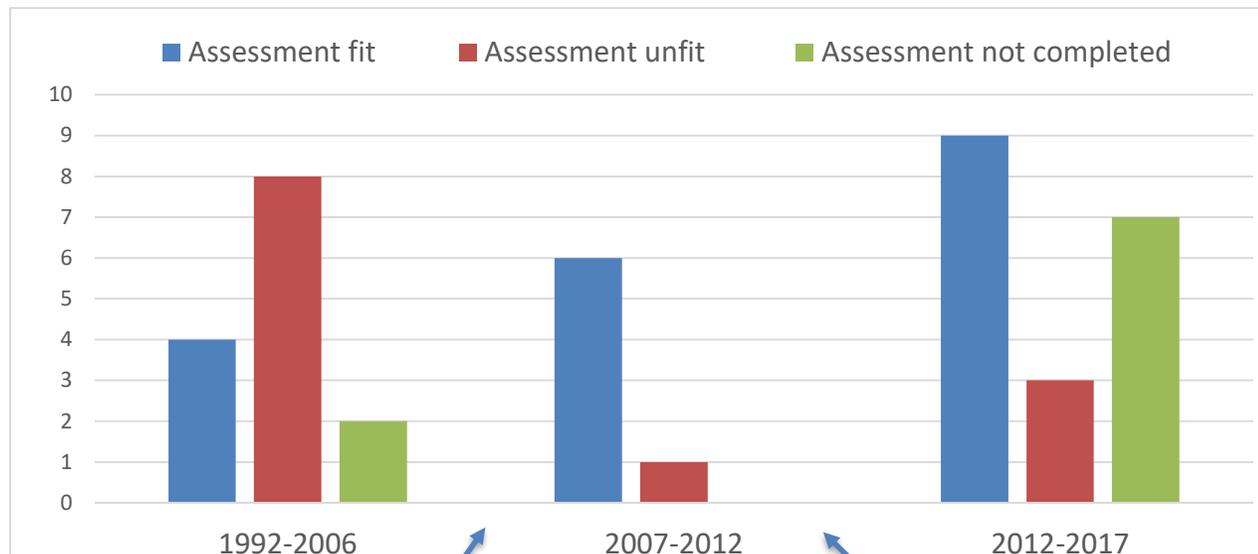
Results

- The records for 33 people who applied for a medical certificate between 2002 and 2017 were reviewed (a further 7 applicants 1992-2001 are not included in these tables due to incomplete records)
- 18 of 33 applicants were assessed as fit
- 7 applicants successfully managed most of the components of the assessment but did not submit the results of cognitive function testing (deferred/incomplete) [The LAPL applicant never submitted reports for another issue]. In 4 cases we can't exclude that the reason for non-submission was an abnormal cognitive test that they did not wish to submit.

		Fit	Unfit	Deferred/ Incomplete
Class 1	initial	1	2	2
	renewal/reval	6	2	1
Class 2	initial	5	2	3
	renewal/reval	2	1	1
Class 3	initial	0	0	0
	renewal/reval	4	0	0
LAPL	initial	0	0	1
	renewal/reval	0	0	0

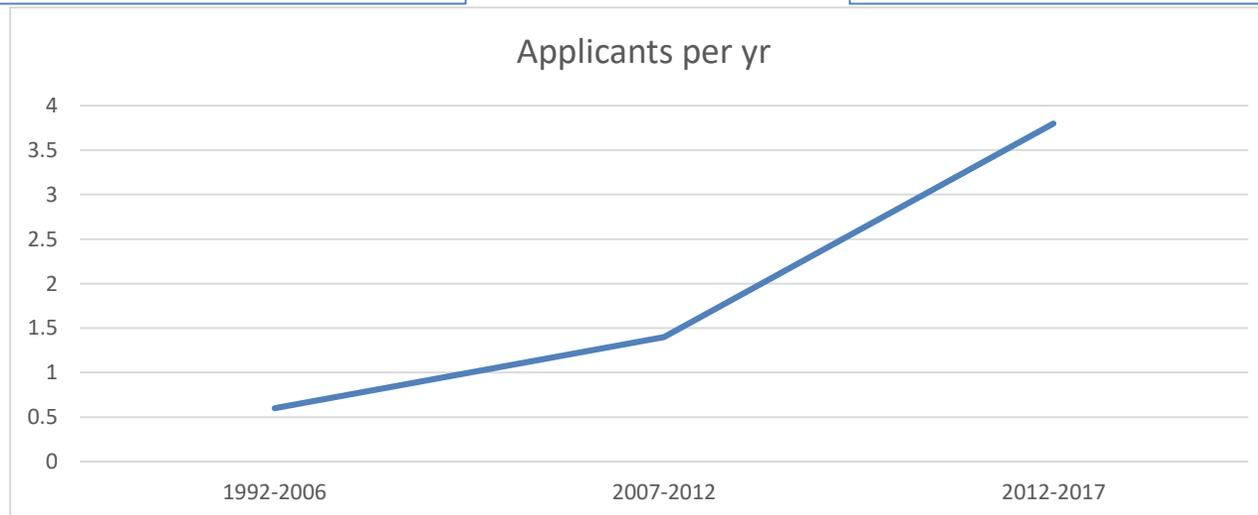
Results

- Prior to 2007 most applicants/certificate holders were assessed as unfit and since 2012 most are assessed as fit
- The number of applicants/certificate holders declaring a positive HIV test per year has increased from 1.4/year between 2002 and 2007 to 3.8/year between 2012 and 2017
- No initial class 1 certificates have been issued since 2012



UK CAA guidance published

Aircrew Reg implemented in UK



Results

- 2 initial applicants had abnormal neurocognitive function tests - one “inconclusive” for Asymptomatic Neurocognitive Impairment (ANI) and the other “possible early evidence” of ANI – neither have ever held aeromedical certification
- 3 applicants issued certificates in 2003, 2010 & 2011 went on to be assessed as unfit due to conditions possibly associated with HIV seropositivity (2 mood disorders and 1 co-infection with Hep C)

Discussion

- HIV Associated Neurocognitive Disorders (HAND) and cognitive function testing
- Increasing declarations – policy on website, reflection of “People Living With HIV” (PLWH)
- No initial certification
- Delays in being assessed as fit usually due to obtaining reports, particularly neurocognitive testing



Ongoing Issues

- **Keeping up with the meds**
 - the fast pace of change
- **HAART from diagnosis**
 - implications for initial certification
 - better management but lag in risk of disease progression data
- **Undeclared seropositivity**
 - current rules and changes in management



Further work

- Work with national groups e.g. British HIV Association to review current UK CAA guidance
- Look to create an AltMOC for unrestricted certification assuming sufficient evidence forthcoming